Image# 15971214366 PAGE 1 / 47

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

	or Other Than An Aut	horized Committee		Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing over the lines.	, type 12FE4M	5
American Council of Lit	fe Insurers Political A	Action Committee	• 	
ADDRESS (number and street)	101 Constitution Ave., NW			
Check if different	Suite 700			
than previously reported. (ACC)	Washington		DC	20001
2. FEC IDENTIFICATION NU	MBER ▼ CIT	ГУ▲	STATE ▲	ZIP CODE ▲
C C00147066		S THIS X NE		MENDED A)
4. TYPE OF REPORT (Choose One)	Report Due On:			g 20 (M8) Nov 20 (M11) (Non-Election Year Only) Dec 20 (M9) Dec 20 (M12)
(a) Quarterly Reports:		. ,		(Non-Election Year Only)
April 15 Quarterly Report (Q		20 (M4) Ju	I 20 (M7) Oc	t 20 (M10) Jan 31 (YE)
July 15	(c) 12-Day	Primary (12P)	Genera	Runoff (12R)
Quarterly Report (Q. October 15	Report for the:	Convention (12	2C) Special	(12S)
Quarterly Report (Q January 31 Year-End Report (Yi	Floor	on on	D D / Y Y Y Y	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day	General (30G)	Runoff	(30R) Special (30S)
Termination Report	Report for the:	M M /	D	Y in the
LI (TER)	Election	on on		State of
5. Covering Period 05	M / D D / Y Y Y Y Y Y 1015	through	05 31	2015
I certify that I have examined thi	s Report and to the best of	my knowledge and be	lief it is true, correct a	nd complete.
Type or Print Name of Treasurer	Mr. Donald L. Walker			
Signature of Treasurer Mr. D	Oonald L. Walker	[Electronically l	Filed] Date 06	M / 18 / 2015
NOTE: Submission of false, errone	ous, or incomplete informatio	n may subject the perso	n signing this Report to	the penalties of 2 U.S.C. §437g.
Office Use				FEC FORM 3X Rev. 12/2004
l I Only I	1 1	1 1		

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)
Page 2

Write or Type Committee Name

American Council of Life Insurers Political Action Committee

Report Covering the Period: From: 05 01 2015 To: 05 31 2015

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2015		620787.98
	(b) Cash on Hand at Beginning of Reporting Period	534019.01	
	(c) Total Receipts (from Line 19)	110565.77	224801.80
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	644584.78	845589.78
7.	Total Disbursements (from Line 31)	61500.00	262505.00
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	583084.78	583084.78
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

×

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

American Council of Life Insurers Political Action Committee

Report Covering the Period: From: 05	01 2015 To:	
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Contributions (other than loans) From:	<u>'</u>	
(a) Individuals/Persons Other		
Than Political Committees	60741.36	114696.51
(i) Itemized (use Schedule A)	00741.00	
(ii) Unitemized(iii) TOTAL (add	6824.41	17105.29
Lines 11(a)(i) and (ii)	67565.77	131801.80
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	43000.00	93000.00
(d) Total Contributions (add Lines	,	
11(a)(iii), (b), and (c)) (Carry		
Totals to Line 33, page 5)	110565.77	224801.80
. Transfers From Affiliated/Other		
Party Committees	0.00	0.00
. All Loans Received	0.00	0.00
. All Loans neceived		3 3 3
. Loan Repayments Received	0.00	0.00
Offsets To Operating Expenditures		7
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0.00	0.00
Refunds of Contributions Made		
to Federal Candidates and Other		
Political Committees	0.00	0.00
. Other Federal Receipts		
(Dividends, Interest, etc.)	0.00	0.00
. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account		
(from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
. Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))▶	110565.77	224801.80
. Total Federal Receipts	110565 77	224904 90
(subtract Line 18(c) from Line 19)▶	110565.77	224801.80

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
I. Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		Calonida Tour to Bute
(i) Federal Share	0.00	0.00
(°) No. 5. b. 10b.	0.00	0.00
(ii) Non-Federal Share(b) Other Federal Operating	0.00	0.00
Expenditures	0.00	0.00
(c) Total Operating Expenditures		
(add 21(a)(i), (a)(ii), and (b))▶ Transfers to Affiliated/Other Party	0.00	0.00
Committees	0.00	0.00
Contributions to Federal Candidates/Committees and Other Political Committees	61500.00	262500.00
Independent Expenditures	0.00	0.00
(use Schedule E) Coordinated Party Expenditures	0.00	0.00
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
Loans Made	0.00	0.00
(a) Individuals/Persons Other Than Political Committees	0.00	5.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds	0.00	5.00
(add Lines 28(a), (b), and (c))▶	7 7	3.00
Other Disbursements	0.00	0.00
Federal Election Activity (2 U.S.C. §431(20)) (a) Allocated Federal Election Activity		
(from Schedule H6) (i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	61500.00	262505.00
Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	61500.00	262505.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	110565.77	224801.80
4. Total Contribution Refunds (from Line 28(d))	0.00	5.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	110565.77	224796.80
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0.00	0.00
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 OF 47 (check only one) X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Council of Life Insure Full Name (Last, First, Middle Initial) Mr. Esfandyar E. Dinshaw Mailing Address 3615 131st Street City	e name and address of any political committee	
Urbandale FEC ID number of contributing federal political committee. Name of Employer Sammons Financial Group Receipt For: Primary General Other (specify)	IA 50323-1714 C Occupation Chairman & CEO Aggregate Year-to-Date ▼ 5000.00	Amount of Each Receipt this Period 5000.00
Full Name (Last, First, Middle Initial) John Foley Mailing Address 5512 St. Charles Avenue City New Orleans FEC ID number of contributing federal political committee. Name of Employer Pan-American Life Insurance Company Receipt For: Primary Other (specify) Other (specify)	State Zip Code LA 70115-5048 C Occupation Senior Vice President Aggregate Year-to-Date ▼ 300.00	Date of Receipt 05 11 2015 Transaction ID: 65830995 Amount of Each Receipt this Period 300.00
Full Name (Last, First, Middle Initial) Mr. William R. Schmeeckle Mailing Address P.O. Box 82533 City Lincoln FEC ID number of contributing federal political committee. Name of Employer Assurity Life Insurance Company Receipt For: Primary Other (specify) Other (specify)	State Zip Code NE 68501-2533 C Occupation Second Vice President-Mortgage Investm Aggregate Year-to-Date ▼ 250.00	Date of Receipt M

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5550.00

	FOR LINE NUMBER:	PAGE	
Use separate schedule(s) for each category of the	(check only one)		_
Detailed Summary Page	X 11a 11b	11c	_
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7 OF 47 12 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Council of Life Insurers Political Action Committee Full Name (Last, First, Middle Initial) Mr. James J. Kerwin Date of Receipt Mailing Address One Friends Way 05 03 2015 City Zip Code State Transaction ID: 65837079 NY Saint James 11780-1333 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer Occupation Security Mutual Life Insurance Company **Executive Vice President** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Vincent J. Montelione Date of Receipt Mailing Address 226 Parks Road 05 03 2015 City State Zip Code Transaction ID: 65837321 NY Chenango Forks 13746-2126 Amount of Each Receipt this Period FEC ID number of contributing 260.00 federal political committee. Name of Employer Occupation Security Mutual Life Insurance Company Senior Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 260.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. James M. Lynch FSA Date of Receipt Mailing Address P. O. Box 1625 05 11 2015 City Zip Code State **Transaction ID: 65838183** NY Binghamton 13902-1625 Amount of Each Receipt this Period FEC ID number of contributing 480.00 С federal political committee. Name of Employer Occupation Security Mutual Life Insurance Company Vice President & Chief Actuary Receipt For: Aggregate Year-to-Date ▼ Primary General 480.00 Other (specify) 1240.00 SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: **PAGE** 8 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

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for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Council of Life Insurers Political Action Committee Full Name (Last, First, Middle Initial) Marc Novotney Date of Receipt Mailing Address 100 Count St 2015 City Zip Code State Transaction ID: 65838186 NY Binghamton 13901-3479 Amount of Each Receipt this Period FEC ID number of contributing C 300.00 federal political committee. Name of Employer Occupation **EVP Middle Market** Security Mutual Life Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. Paul B Pheffer Date of Receipt Mailing Address 100 Court Street 05 2015 11 City State Zip Code Transaction ID: 65838275 NY Binghamton 13901-3479 Amount of Each Receipt this Period FEC ID number of contributing 1600.00 federal political committee. Name of Employer Occupation Security Mutual Life Insurance Company **CFO** Receipt For: Aggregate Year-to-Date ▼ Primary General 1600.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Gary Scofield Date of Receipt Mailing Address 45 Blyndenburgh Lane 05 11 2015 City Zip Code State **Transaction ID: 65838793** NY Stony Brook 11790-2123 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Security Mutual Life Insurance Company Exec. Vice President & Corp. Actuary Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 2400.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

FOR LINE NUMBER: **PAGE** 9 Use separate schedule(s) (check only one) X 11a 11b 11c

OF

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for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Council of Life Insurers Political Action Committee Full Name (Last, First, Middle Initial) Mr. Frederick L. Wortman Date of Receipt Mailing Address 104 Lagrange Street 05 2015 City Zip Code State Transaction ID: 65838811 NY Vestal 13850-2455 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer Occupation Security Mutual Life Insurance Company Executive Vice President, Administrati Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Marvin P. Ehly Date of Receipt Mailing Address 9900 Van Dorn Street 05 2015 11 City State Zip Code **Transaction ID: 65838991** NE Lincoln 68520-9446 Amount of Each Receipt this Period FEC ID number of contributing 300.00 federal political committee. Name of Employer Occupation Assurity Life Insurance Company Vice President & Chief Financial Offic Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Ms. Linda M. Izzo Date of Receipt Mailing Address 40 Gloria Drive 05 13 2015 City Zip Code State Transaction ID: 65839344 MA Bridgewater 02324-2100 Amount of Each Receipt this Period FEC ID number of contributing 750.00 С federal political committee. Name of Employer Occupation Boston Mutual Life Insurance Company Vice President, Client Services Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) 1300.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

	FOR LINE	NUMBER	:	PAGE	. 1	10
Use separate schedule(s)	(check only	y one)	_			
for each category of the Detailed Summary Page	X 11a	11b		11c		12
	12	1.1		45		16

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OF

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Council of Life Insurers Political Action Committee Full Name (Last, First, Middle Initial) Mr. Paul E. Petry Date of Receipt Mailing Address 20 Bayberry Way 05 2015 City State Zip Code Transaction ID: 65839345 MA 02655-2405 Osterville Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Name of Employer Occupation Boston Mutual Life Insurance Company President & CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial)

B. Ms. Mary T. Tillson		Date of Receipt
Mailing Address 79 Briarcliff Road		05 13 2015
City	State Zip Code	Transaction ID: 65839346
Brockton	MA 02301-3009	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	750.00
Name of Employer	Occupation	-
Boston Mutual Life Insurance Company	Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) C. Mr. Clifford A. Lange		Date of Receipt
Mailing Address 110 Elm Street		05 13 2015
City	State Zip Code	Transaction ID: 65839347
Medfield	MA 02052-2823	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	750.00
Name of Employer	Occupation	-
Boston Mutual Life Insurance Company	Vice President, CFO, & Chief Actuary	
Receipt For: Primary General	Aggregate Year-to-Date ▼	

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2500.00

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 11 OF Use separate schedule(s) (check only one)

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a
Any information copied from such Reports and Stator for commercial purposes, other than using the n		
NAME OF COMMITTEE (In Full) American Council of Life Insurers	Political Action Committee	
, ,	State Zip Code MA 02351-1208 C Occupation 2nd Vice President Aggregate Year-to-Date ▼	Date of Receipt 05 13 2015 Transaction ID: 65839348 Amount of Each Receipt this Period 250.00
Poston Mutual Life Insurance Company	State Zip Code MA 02021-1028 C Occupation 2nd VP of General Agencies Aggregate Year-to-Date ▼ 250.00	Date of Receipt 05
Global Atlantic Life and Annuity	State Zip Code NY 11030-1632 C Occupation EVP, General Counsel & Secretary Aggregate Year-to-Date ▼ 1000.00	Date of Receipt 05 13 2015 Transaction ID: 65839350 Amount of Each Receipt this Period
SUBTOTAL of Receipts This Page (optional)		1500.00
TOTAL This Period (last page this line number on	ıly)	

FOR LINE NUMBER: PAGE 12 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

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14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Council of Life Insurers Political Action Committee Full Name (Last, First, Middle Initial) Paula G Nelson Date of Receipt Mailing Address 18785 11th Ave N 2015 13 City Zip Code State Transaction ID: 65839351 MN Plymouth 55447-2508 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Name of Employer Occupation Global Atlantic Life and Annuity Managing Director Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Nicholas Von Moltke Date of Receipt Mailing Address 270 Riverside Drive Apt 9A 05 13 2015 City State Zip Code Transaction ID: 65839352 NY New York 10025-5211 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Global Atlantic Life and Annuity President & CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Kathleen Redgate Date of Receipt Mailing Address 1532 Green End Ave 2015 05 13 City State Zip Code Transaction ID: 65839353 RΙ Middletown 02842-5709 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation Global Atlantic Life and Annuity Managing Director Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 3000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

	FOR LINE NUMBER: PAG	E 13 OF
Use separate schedule(s)	(check only one)	
for each category of the Detailed Summary Page	X 11a 11b 11c	12
,	13 14 15	16

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Any information copied from such Reports and or for commercial purposes, other than using th	Statements may not be sold or used by any persone name and address of any political committee to	son for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Council of Life Insure	ers Political Action Committee	
Full Name (Last, First, Middle Initial) Mary L. Cavanaugh Mailing Address 400 Artifactors St.		Date of Receipt
Mailing Address 100 Arlington St. Apt. 11F		05 13 _ 2015 _
City	State Zip Code	Transaction ID : 65839354
Boston	MA 02116-5359	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	+
Global Atlantic Life and Annuity	EVP, General Counsel & Corporate Secre	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) 3. Mr. Todd Reimers	•	Date of Receipt
Mailing Address 2233 S. 124th Street	Chata 7in Cada	05 13 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Walton	State Zip Code NE 68461-9705	Transaction ID : 65839464
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 450.00
Name of Employer Assurity Life Insurance Company	Occupation Senior Vice President & Chief Marketin	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	
Full Name (Last, First, Middle Initial) Mr. Bruce W. Boyea	1	Date of Receipt
Mailing Address 15 Campbell Road Court		05 18 2015
City	State Zip Code NY 13905-4301	Transaction ID: 65891308
Binghamton	NY 13905-4301	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	2500.00
Name of Employer	Occupation	1
Security Mutual Life Insurance Company	Chairman, President & CEO	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	2500.00	
SUBTOTAL of Receipts This Page (optional)		3950.00
TOTAL This Period (last page this line number	r only)	

FOR LINE NUMBER: PAGE 14 OF 47 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c

Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Council of Life Insurers Political Action Committee Full Name (Last, First, Middle Initial) Ms. JoAnn M. Martin Date of Receipt Mailing Address 6221 Andrew Ct. 2015 18 City Zip Code State Transaction ID: 65892357 ΝE Lincoln 68512-1904 Amount of Each Receipt this Period FEC ID number of contributing C 5000.00 federal political committee. Name of Employer Occupation Chair, President & CEO Ameritas Life Insurance Corp. Receipt For: Aggregate Year-to-Date ▼ Primary General 5000.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Mary Rutford Date of Receipt Mailing Address 7200 Sugar Creek Circle 05 18 2015 City State Zip Code Transaction ID: 65892358 NE Lincoln 68516-5634 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Ameritas Life Insurance Corp. VP - Tax Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. William W Lester Date of Receipt Mailing Address 6548 Rolling Hills Ct. 05 18 2015 City State Zip Code Transaction ID: 65892359 NF Lincoln 68512-2215 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation **EVP & Corporate Treasurer** Ameritas Life Insurance Corp. Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 6000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

	FOR LINE NUME	BER: PAGE	E 15 OF				
Use separate schedule(s)	(check only one)						
for each category of the Detailed Summary Page	X 11a 11	b 11c	12				
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Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may not be sold or used by any per g the name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Council of Life Ins	urers Political Action Committee	
Full Name (Last, First, Middle Initial) Kenneth L VanCleave Mailing Address 7633 Cooper Ave. City Lincoln FEC ID number of contributing federal political committee. Name of Employer Ameritas Life Insurance Corp. Receipt For: Primary General Other (specify)	State Zip Code NE 68506-4628 C Occupation President, Ameritas Group Aggregate Year-to-Date ▼	Date of Receipt M
Full Name (Last, First, Middle Initial) Tim Stonehocker Mailing Address 5900 O Street City Lincoln FEC ID number of contributing federal political committee. Name of Employer Ameritas Life Insurance Corp. Receipt For: Primary General Other (specify)	State Zip Code NE 68510-2234 C Occupation Executive Vice President Aggregate Year-to-Date ▼ 500.00	Date of Receipt Mark
Full Name (Last, First, Middle Initial) Robert-John H Sands Mailing Address 5900 O Street City Lincoln FEC ID number of contributing federal political committee. Name of Employer Ameritas Mutual Holding Co. Receipt For: Primary General Other (specify)	State Zip Code NE 68510-2234 C Occupation Sr VP, General Counsel & Corp Sec. Aggregate Year-to-Date ▼ 500.00	Date of Receipt M M M / D B / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional	NI)	1500.00
TOTAL This Period (last page this line num	nber only).	

FOR LINE NUMBER: PAGE 16 OF 47 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Council of Life Insurers Political Action Committee Full Name (Last, First, Middle Initial) Susan K Wilkinson Date of Receipt Mailing Address 5900 O Street 2015 18 City Zip Code State Transaction ID: 65892373 ΝE Lincoln 68510-2234 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer Occupation Senior Vice President - Planning & Ris Ameritas Life Insurance Corp. Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Linda Whitmire Date of Receipt Mailing Address 5300 Carlisle Ct. 05 18 2015 City State Zip Code Transaction ID: 65892384 NE Lincoln 68516-9431 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Ameritas Life Insurance Corp. SVP, Chief Actuary, Corporate Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Susan T. Deakins Date of Receipt Mailing Address 1297 Farm Rd. 2015 05 18 City State Zip Code Transaction ID: 65892455 PΑ Berwyn 19312-2064 Amount of Each Receipt this Period FEC ID number of contributing 2500.00 С federal political committee. Name of Employer Occupation Penn Mutual Life Insurance Company, Th SVP & CFO Receipt For: Aggregate Year-to-Date ▼ Primary General 2500.00 Other (specify) 3250.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

FOR LINE NUMBER: PAGE 17 OF 47 Use for ea Detai

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	d Statements may not be sold or used by any per the name and address of any political committee t	
NAME OF COMMITTEE (In Full) American Council of Life Insul	rers Political Action Committee	
Full Name (Last, First, Middle Initial) Mr. George B. Kozol Mailing Address P. O. Box 1625		Date of Receipt
		05 18 2015
City	State Zip Code	Transaction ID : 65894437
Binghamton	NY 13902-1625	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer	Occupation	1
Security Mutual Life Insurance Company	Senior Vice President, Marketing	
Receipt For:	Aggregate Year-to-Date ▼]
Primary General Other (specify) ▼	300.00	
Full Name (Last, First, Middle Initial) Mr. Eric J. Bernazzani		Date of Receipt
Mailing Address 215 Shaw Ave	7.0.1	05 18 2015
City	State Zip Code MA 02351-1624	Transaction ID : 65894440
Abington FEO ID resolves of contributions	MA 02351-1624	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	750.00
Name of Employer Boston Mutual Life Insurance Company	Occupation VP - IT	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	750.00	
Full Name (Last, First, Middle Initial) Carlos Mickan		Date of Receipt
Mailing Address 217 English Turn Dr.		05 26 2015
City New Orleans	State Zip Code LA 70131-3348	Transaction ID : 66236729 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	400.00
Name of Employer	Occupation	1
Pan-American Life Insurance Company	Executive Vice President, CFO	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General		
Other (specify) ▼	400.00	
SUBTOTAL of Receipts This Page (optional).	<u> </u>	1450.00
TOTAL This Period (last page this line numb	er only)	

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for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Council of Life Insurers Political Action Committee Full Name (Last, First, Middle Initial) Selig Ehrlich Date of Receipt Mailing Address 1081 Channel Dr. 2015 26 City Zip Code State Transaction ID: 66236732 NY Hewlett 11557-2637 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer Occupation Chief Actuary & Risk Officer Pan-American Life Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Bruce Parker Date of Receipt Mailing Address 10 Edgewater Dr Apt 3F 05 26 2015 City State Zip Code Transaction ID: 66236733 Coral Gables FL 33133-6962 Amount of Each Receipt this Period FEC ID number of contributing 300.00 federal political committee. Name of Employer Occupation Pan-American Life Insurance Company SVP, Global Life Insurance Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) c. Rodolfo Revuelta Date of Receipt Mailing Address 71 Grand Canyon Dr. 05 26 2015 City State Zip Code Transaction ID: 66236734 LA **New Orleans** 70131-8634 Amount of Each Receipt this Period FEC ID number of contributing 300.00 С federal political committee. Name of Employer Occupation Senior Vice President & CIO Pan-American Life Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 1100.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Council of Life Insurers Political Action Committee Full Name (Last, First, Middle Initial) Mr. William R. Cintani Date of Receipt Mailing Address 9221 Tuscan CT 05 2015 26 City Zip Code State Transaction ID: 66236828 ΝE Lincoln 68520-1470 Amount of Each Receipt this Period FEC ID number of contributing C 300.00 federal political committee. Name of Employer Occupation President & CEO Mapes Industries, Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ms. Caren L. Hamilton Date of Receipt Mailing Address 3134 Brentwood Blvd 05 26 2015 City State Zip Code **Transaction ID: 66236829** Grand Island NE 68801-7251 Amount of Each Receipt this Period FEC ID number of contributing 300.00 federal political committee. Name of Employer Occupation Beardmore Chevrolet Auto Dealership Owner Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Marc LeBaron Date of Receipt Mailing Address 6130 The Knolls 05 26 2015 City State Zip Code Transaction ID: 66236830 NF Lincoln 68512-1942 Amount of Each Receipt this Period FEC ID number of contributing 300.00 С federal political committee. Name of Employer Occupation Chairman & CEO Lincoln Industries Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 900.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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NAME OF COMMITTEE (In Full) American Council of Life Insu	rers Political Action Committee	
Full Name (Last, First, Middle Initial) Ms. Angie Muhleisen Mailing Address 6321 Doecreek Cr. City Lincoln FEC ID number of contributing federal political committee. Name of Employer Union Bank & Trust Company Receipt For: Primary General Other (specify)	State Zip Code NE 68516-3796 C Occupation President & CEO Aggregate Year-to-Date ▼ 300.00	Date of Receipt 05 26 2015 Transaction ID: 66236956 Amount of Each Receipt this Period 300.00
Full Name (Last, First, Middle Initial) Mr. Steve Erwin Mailing Address 7290 Cole Ct City Lincoln FEC ID number of contributing federal political committee. Name of Employer U.S. Bank National Association Receipt For: Primary General Other (specify) Other (specify)	State Zip Code NE 68506-3183 C Occupation President, Nebraska/ Western Iowa Aggregate Year-to-Date ▼ 300.00	Date of Receipt M M M / D D / Y Y Y Y Y 05
Full Name (Last, First, Middle Initial) Charles R Mabry Jr Mailing Address 120 Royall St City Canton FEC ID number of contributing federal political committee. Name of Employer Boston Mutual Life Insurance Company Receipt For: Primary General Other (specify)	State Zip Code MA 02021-1028 C Occupation Vice President - Worksite Marketing Aggregate Year-to-Date ▼ 500.00	Date of Receipt Mark
SUBTOTAL of Receipts This Page (optional).	<u> </u>	1100.00
TOTAL This Period (last page this line numb	er only)	

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for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Council of Life Insurers Political Action Committee Full Name (Last, First, Middle Initial) Ms Christine T Coughlin Date of Receipt Mailing Address 61 Rangeley Road 2015 26 City Zip Code State Transaction ID: 66237293 Arlington MA 02474-1235 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer Occupation Treasurer & 2nd VP Corporate Tax Boston Mutual Life Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. David Mitchell Date of Receipt Mailing Address 72 Appleton St 05 26 2015 City State Zip Code Transaction ID: 66237296 MA **Boston** 02116-6214 Amount of Each Receipt this Period FEC ID number of contributing 750.00 federal political committee. Name of Employer Occupation Boston Mutual Life Insurance Company VP - Group Benefits Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Pat Frazier Date of Receipt Mailing Address 2472 Bedford Dr. 05 26 2015 City State Zip Code Transaction ID: 66237297 LA **New Orleans** 70131-4702 Amount of Each Receipt this Period FEC ID number of contributing 300.00 С federal political committee. Name of Employer Occupation SVP, HR, General Counsel & Corp. Secre Pan-American Life Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 1300.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

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14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Council of Life Insurers Political Action Committee Full Name (Last, First, Middle Initial) Robert DiCianni Date of Receipt Mailing Address 7350 SW 89th St. Apt. 1407S 2015 26 City State Zip Code Transaction ID: 66237298 FL Miami 33156-7747 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation SVP, International Pan-American Life Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Scott Reitan Date of Receipt Mailing Address 371 Broadway St. 05 26 2015 City State Zip Code Transaction ID: 66237299 **New Orleans** LA 70118-3559 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Pan-American Life Insurance Company SVP Administration & IT Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Joe Monk Date of Receipt Mailing Address 1 State Farm Plaza 2015 05 27 City State Zip Code Transaction ID: 66237600 IL Bloomington 61710-0001 Amount of Each Receipt this Period FEC ID number of contributing 2500.00 С federal political committee. Name of Employer Occupation SVP - Chief Adminstrative Officer State Farm Life Insurance Receipt For: Aggregate Year-to-Date ▼ Primary General 2500.00 Other (specify) 3500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

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for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Council of Life Insurers Political Action Committee Full Name (Last, First, Middle Initial) Jose Suquet Date of Receipt Mailing Address 601 Poydras Street 2015 26 City State Zip Code Transaction ID: 66237651 70130-6029 **New Orleans** LA Amount of Each Receipt this Period FEC ID number of contributing 5000.00 federal political committee. Name of Employer Occupation President & CEO, Chairman of the Board Pan-American Life Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 5000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Roger W Crandall Date of Receipt Mailing Address 1295 State St. 05 26 2015 City State Zip Code Transaction ID: 66237655 MA Springfield 01111-0001 Amount of Each Receipt this Period FEC ID number of contributing 5000.00 federal political committee. Name of Employer Occupation MassMutual Life Insurance Company Chairman, President & CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 5000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Paul A. Quaranto Jr. Date of Receipt Mailing Address 3 Musket Way 2015 05 26 City Zip Code State Transaction ID: 66238485 MA Franklin 02038-3627 Amount of Each Receipt this Period FEC ID number of contributing 4000.00 С federal political committee. Name of Employer Occupation President & CEO Boston Mutual Life Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 4000.00 Other (specify) 14000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Council of Life Insurers Political Action Committee Full Name (Last, First, Middle Initial) Mr. Donald L. Walker Date of Receipt Mailing Address 101 Constitution Ave, NW Suite 700 2015 31 City Zip Code State Transaction ID: PR1156427141077 DC Washington 20001-2133 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation SVP, Administration & CFO American Council of Life Insurers Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$50.00 Semi-Monthly) 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ms. Mandana Parsazad Date of Receipt Mailing Address 1914 Horse Shoe Drive 05 31 2015 City State Zip Code Transaction ID: PR1481799841077 VA Vienna 22182-3755 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation American Council of Life Insurers Senior Counsel, Taxes & Retirement Sec Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$25.00 Semi-Monthly) 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Scott E. Smith Date of Receipt Mailing Address 19 Cardinal Way 05 31 2015 City State Zip Code Transaction ID: PR1503555341077 CT South Windsor 06074-3745 Amount of Each Receipt this Period FEC ID number of contributing 40.00 С federal political committee. Name of Employer Occupation Senior Vice President & COO Vantis Life Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$20.00 Bi-Weekly) 220.00 Other (specify) 190.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

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25 OF 47 Use separate schedule(s) for each category of the 12 Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Council of Life Insurers Political Action Committee Full Name (Last, First, Middle Initial) Ms. Kathleen F. Kiernan Date of Receipt Mailing Address 101 Constitution Ave, NW Suite 700 2015 31 City Zip Code State Transaction ID: PR1728112741077 DC Washington 20001-2140 Amount of Each Receipt this Period FEC ID number of contributing 160.00 federal political committee. Name of Employer Occupation American Council of Life Insurers Sr. Counsel, State Relations Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$80.00 Semi-Monthly) 800.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ms. Carolyn C. Cobb Date of Receipt Mailing Address 101 Constitution Ave, NW Suite 700 05 31 2015 City State Zip Code Transaction ID: PR1821819641077 DC Washington 20001-2133 Amount of Each Receipt this Period FEC ID number of contributing 237.30 federal political committee. Name of Employer Occupation American Council of Life Insurers Vice President & Associate General Cou Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$118.65 Semi-Monthly) 1186.49 Other (specify) Full Name (Last, First, Middle Initial) c. The Honora Dirk A. Kempthorne Date of Receipt Mailing Address 101 Constitution Ave, NW 05 31 2015 Suite 700 City Zip Code State Transaction ID: PR1871324541077 DC Washington 20001-2133 Amount of Each Receipt this Period FEC ID number of contributing 416.66 С federal political committee. Name of Employer Occupation President and CEO American Council of Life Insurers Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$208.33 Semi-Monthly) 2083.30 Other (specify) 813.96 SUBTOTAL of Receipts This Page (optional).....

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	ne name and address of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) A. Mr. Brian Waidmann	EIS FUILICAI ACIIUII CUIIIIIIIILEE	Date of Receipt
Mailing Address 101 Constitution Ave, NW Suite 700		05 31 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : PR1872428341077
Washington	DC 20001-2133	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	400.00
Name of Employer	Occupation	-
American Council of Life Insurers	Chief of Staff	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	2000.00	P/R Deduction (\$200.00 Semi-Monthly)
Full Name (Last, First, Middle Initial) 3. William R Hobbs		Date of Receipt
Mailing Address 13005 Windsor Circle		M = M / D = D / Y = Y = Y
City	State Zip Code	05 31 2015
City Leawood	State Zip Code KS 66209-1793	Transaction ID : PR1964225741077
	100203-1130	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	1
Fidelity Security	VP Finance	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	P/R Deduction (\$25.00 Semi-Monthly)
Full Name (Last, First, Middle Initial) Anita Peduzzi		Date of Receipt
Mailing Address 101 Constitution Avenue Suite 700 W		05 31 2015
City	State Zip Code DC 20001-2146	Transaction ID : PR1978714941077
Washington	DC 20001-2146	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.34
Name of Employer	Occupation	-
American Council of Life Insurers	PAC Director	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	416.70	P/R Deduction (\$41.67 Semi-Monthly)
SUBTOTAL of Receipts This Page (optional)		533.34
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14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Council of Life Insurers Political Action Committee Full Name (Last, First, Middle Initial) Maria Lauterette Date of Receipt Mailing Address 800 N Magnolia Avenue **Suite 1400** 2015 31 City State Zip Code Transaction ID: PR2019035341077 FL Orlando 32803-3248 Amount of Each Receipt this Period FEC ID number of contributing 80.00 federal political committee. Name of Employer Occupation VP, Human Resources Hannover Life Reassurance Company of A Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$40.00 Semi-Monthly) 400.00 Other (specify) Full Name (Last, First, Middle Initial) B. Jessica M. M Hanson Date of Receipt Mailing Address 1707 Prince St. 05 31 2015 City State Zip Code Transaction ID: PR2023274641077 VA Alexandria 22314-2804 Amount of Each Receipt this Period FEC ID number of contributing 83.40 federal political committee. Name of Employer Occupation American Council of Life Insurers Vice President, Communications Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$41.70 Semi-Monthly) 417.00 Other (specify) Full Name (Last, First, Middle Initial) c. Emily C. C Micale Date of Receipt Mailing Address 101 Constitution Avenue NW 05 31 2015 Suite 700 City Zip Code State Transaction ID: PR2122882041077 DC Washington 20001-2133 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation American Council of Life Insurers Counsel Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$25.00 Semi-Monthly) 250.00 Other (specify) 213.40 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

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14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Council of Life Insurers Political Action Committee Full Name (Last, First, Middle Initial) James Szostek Date of Receipt Mailing Address 101 Constitution Avenue NW Suite 700 2015 31 City Zip Code State Transaction ID: PR2122891041077 DC 20001-2133 Washington Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation Public Policy American Council of Life Insurers Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$25.00 Semi-Monthly) 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ian F. F Steger Date of Receipt Mailing Address 101 Constitution Avenue NW Suite 700 05 31 2015 City State Zip Code Transaction ID: PR2160513741077 DC Washington 20001-2133 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation American Council of Life Insurers Legislative Analyst Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$25.00 Semi-Monthly) 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Bruce Friedland Date of Receipt Mailing Address 200 Day Hill Road 05 31 2015 City State Zip Code Transaction ID: PR2285776941077 CT Windsor 06095-1779 Amount of Each Receipt this Period FEC ID number of contributing 40.00 С federal political committee. Name of Employer Occupation **SVP & Chief Actuary** Vantis Life Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$20.00 Bi-Weekly) 220.00 Other (specify) 140.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 -

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14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Council of Life Insurers Political Action Committee Full Name (Last, First, Middle Initial) Gail Lataille Date of Receipt Mailing Address 256 Stanley Dr 2015 31 City State Zip Code Transaction ID: PR2285777141077 CT 06033-2622 Glastonbury Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Name of Employer Occupation SVP & Treasurer Vantis Life Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$20.00 Bi-Weekly) 220.00 Other (specify) Full Name (Last, First, Middle Initial) B. Edmund Mahoney Date of Receipt Mailing Address 20 Northgate 05 31 2015 City State Zip Code Transaction ID: PR2285777341077 CT Simsbury 06070-1021 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Name of Employer Occupation Vantis Life Insurance Company SVP Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$20.00 Bi-Weekly) 220.00 Other (specify) Full Name (Last, First, Middle Initial) c. Craig Simms Date of Receipt Mailing Address 200 Day Hill Road 05 31 2015 City State Zip Code Transaction ID: PR2285777741077 CT Windsor 06095-1779 Amount of Each Receipt this Period FEC ID number of contributing 40.00 С federal political committee. Name of Employer Occupation SVP Vantis Life Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$20.00 Bi-Weekly) 220.00 Other (specify) 120.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Council of Life Insurers Political Action Committee Full Name (Last, First, Middle Initial) Peter Tedone Date of Receipt Mailing Address 32 Lincoln Lane 31 2015 City State Zip Code Transaction ID: PR2285778841077 CT 06089-9780 Weatogue Amount of Each Receipt this Period FEC ID number of contributing C 41.60 federal political committee. Name of Employer Occupation President & CEO Vantis Life Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$20.80 Bi-Weekly) 208.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Mr. Gary E. Hughes Date of Receipt Mailing Address 101 Constitution Avenue, NW Suite 700 West 05 2015 31

Zip Code

State

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

Washington	DC 20001-2133	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	366.62
Name of Employer American Council of Life Insurers Receipt For: Primary General Other (specify) ▼	Occupation Executive Vice President & General Cou Aggregate Year-to-Date ▼ 1833.10	P/R Deduction (\$183.31 Semi-Monthly)
Full Name (Last, First, Middle Initial) C. Ms. Linda H. Cunningham Mailing Address 101 Constitution Avenu Suite 700 West	e, NW	Date of Receipt 05 31 2015
City	State Zip Code	Transaction ID : PR771362441077
Washington	DC 20001-2133	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	119.66
Name of Employer	Occupation	
American Council of Life Insurers	Vice President, Conference Development	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 598.31	P/R Deduction (\$59.83 Semi-Monthly)
CURTOTAL of Provints This Provi (autism		527.88

Transaction ID: PR771358241077

City

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Council of Life Insurers Political Action Committee Full Name (Last, First, Middle Initial) Mr. John F. Dolan Date of Receipt Mailing Address 101 Constitution Ave, NW Suite 700 West 2015 31 City Zip Code State Transaction ID: PR771365441077 DC Washington 20001-2133 Amount of Each Receipt this Period FEC ID number of contributing 60.00 federal political committee. Name of Employer Occupation Vice President, Media Relations American Council of Life Insurers Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Semi-Monthly) 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. J. Bruce Ferguson Date of Receipt Mailing Address 101 Constitution Avenue, NW Suite 700 West 05 31 2015 City State Zip Code Transaction ID: PR771373241077 DC Washington 20001-2133 Amount of Each Receipt this Period FEC ID number of contributing 316.44 federal political committee. Name of Employer Occupation American Council of Life Insurers Senior Vice President, State Relations Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$158.22 Semi-Monthly) 1582.21 Other (specify) Full Name (Last, First, Middle Initial) c. Ms. Shawn Hausman Date of Receipt Mailing Address 101 Constitution Avenue, NW Suite 700 West 05 31 2015 City Zip Code State Transaction ID: PR771373541077 DC Washington 20001-2133 Amount of Each Receipt this Period FEC ID number of contributing 69.62 С federal political committee. Name of Employer Occupation American Council of Life Insurers Sr. Vice President, Public Affairs Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$34.81 Semi-Monthly) 348.10 Other (specify) 446.06 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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FOR LINE NUMBER: PAGE 32 OF 47 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Council of Life Insurers Political Action Committee Full Name (Last, First, Middle Initial) Mr. David M. Leifer Date of Receipt Mailing Address 101 Constitution Avenue, NW Suite 700 West 2015 31 City Zip Code State Transaction ID: PR771374041077 DC Washington 20001-2133 Amount of Each Receipt this Period FEC ID number of contributing 177.58 federal political committee. Name of Employer Occupation Vice President & Associate General Cou American Council of Life Insurers Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$88.79 Semi-Monthly) 887.91 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. C. Bryan Cox Date of Receipt Mailing Address 101 Constitution Avenue, NW Suite 700 West 05 31 2015 City State Zip Code Transaction ID: PR771376841077 DC Washington 20001-2133 Amount of Each Receipt this Period FEC ID number of contributing 60.14 federal political committee. Name of Employer Occupation American Council of Life Insurers Regional Vice President, State Relatio Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.07 Semi-Monthly) 300.69 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. John W. Mangan CEBS Date of Receipt Mailing Address 101 Constitution Ave, NW 05 31 2015 Suite 700 City Zip Code State Transaction ID: PR771377141077 DC Washington 20001-2133 Amount of Each Receipt this Period FEC ID number of contributing 200.00 С federal political committee. Name of Employer Occupation American Council of Life Insurers Regional Vice President, State Relatio Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$100.00 Semi-Monthly) 1000.00 Other (specify) 437.72 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

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for each category of the Detailed Summary Page	×	11a		11b		11c		12
,		13		14		15		16

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	1 1 7 3 3 3 3	71	
\rangle	NAME OF COMMITTEE (In Full) American Council of Life Insurer	s Political Action Committee	
Α.	Full Name (Last, First, Middle Initial) Mr. Morris R. Goff Mailing Address 101 Constitution Avenue, NW Suite 700 West City Washington FEC ID number of contributing federal political committee. Name of Employer American Council of Life Insurers Receipt For: Primary General Other (specify)	State Zip Code DC 20001-2133 C Occupation Vice President, Federal Relations Aggregate Year-to-Date ▼ 1042.90	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Full Name (Last, First, Middle Initial) Ms. Brenda S. Nation Mailing Address 101 Constitution Avenue, NW Suite 700 West City Washington FEC ID number of contributing federal political committee. Name of Employer	State Zip Code DC 20001-2133 C	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	American Council of Life Insurers Receipt For: Primary General Other (specify) ▼	Regional Vice President, State Relatio Aggregate Year-to-Date ▼ 750.00	P/R Deduction (\$75.00 Semi-Monthly)
) .	Full Name (Last, First, Middle Initial) Ms. Debra K. West Mailing Address 101 Constitution Avenue, NW Suite 700 West City Washington FEC ID number of contributing federal political committee. Name of Employer American Council of Life Insurers Receipt For: Primary General Other (specify)	State Zip Code DC 20001-2133 C Occupation Regional Vice President, State Relatio Aggregate Year-to-Date ▼ 500.00	Date of Receipt 05 31 2015 Transaction ID: PR771421041077 Amount of Each Receipt this Period 100.00 P/R Deduction (\$50.00 Semi-Monthly)
S	UBTOTAL of Receipts This Page (optional)		458.58
Т	OTAL This Period (last page this line number o	nly)	

	FOF	R LINE	NU	IMBER	:	PAGE	: :	34 OI	F	47
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for each category of the Detailed Summary Page	X	11a		11b		11c		12		
ca, . ag.		13		14		15		16		17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

Full Name (Last, First, Middle Initial) Ms. Lisa J. Tate Mailing Address 101 Constitution Avenue, NW Suite 700		Date of Receipt 05 31 2015
City Washington	State Zip Code DC 20001-2133	Transaction ID : PR771423241077
FEC ID number of contributing federal political committee.	C 20001-2133	Amount of Each Receipt this Period 80.00
Name of Employer American Council of Life Insurers Receipt For: Primary General Other (specify)	Occupation VP, Litigation & Assoc. Gen. Counsel Aggregate Year-to-Date ▼ 400.00	P/R Deduction (\$40.00 Semi-Monthly)
Full Name (Last, First, Middle Initial) Mr. John P. John P. Gerni Mailing Address 101 Constitution Ave, NW		Date of Receipt
Suite 700 City Washington	State Zip Code DC 20001-2133	05 31 2015 Transaction ID : PR771428741077 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer American Council of Life Insurers	Occupation Regional Vice President, State Relatio	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	P/R Deduction (\$75.00 Semi-Monthly)
Full Name (Last, First, Middle Initial) Mr. David C. Turner Mailing Address 101 Constitution Ave, NW		Date of Receipt
Suite 700		05 31 2015
City Washington	State Zip Code DC 20001-2133	Transaction ID : PR771428941077
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 277.46
Name of Employer American Council of Life Insurers	Occupation EVP, Chief of Staff & Corp. Secretary	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1387.29	P/R Deduction (\$138.73 Semi-Monthly)

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for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Council of Life Insurers Political Action Committee Full Name (Last, First, Middle Initial) Ms. Alane R. Dent Date of Receipt Mailing Address 101 Constitution Ave, NW Suite 700 2015 31 City Zip Code State Transaction ID: PR771444341077 DC Washington 20001-2133 Amount of Each Receipt this Period FEC ID number of contributing 203.76 federal political committee. Name of Employer Occupation Vice President, Federal Relations American Council of Life Insurers Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$101.88 Semi-Monthly) 1018.80 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Andrew M. Melnyk Date of Receipt Mailing Address 101 Constitution Avenue NW Suite 700 05 31 2015 City State Zip Code Transaction ID: PR771445841077 DC Washington 20001-2133 Amount of Each Receipt this Period FEC ID number of contributing 42.54 federal political committee. Name of Employer Occupation American Council of Life Insurers Managing Director, Research Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$21.27 Semi-Monthly) 212.71 Other (specify) Full Name (Last, First, Middle Initial) c. Ms. Julie A. Spiezio Date of Receipt Mailing Address 101 Constitution Avenue NW 05 31 2015 Suite 700 City Zip Code State Transaction ID: PR771449641077 DC Washington 20001-2133 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation Senior Vice President American Council of Life Insurers Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$50.00 Semi-Monthly) 500.00 Other (specify) 346.30 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

	FOF	R LINE	NU	IMBER	:	PAGE	3	6 O	F	47
Use separate schedule(s)	(che	ck only	or or	ne)						
for each category of the Detailed Summary Page	X	11a		11b		11c		12		
		13		14		15		16		117

	the name and address of any political committee	
American Council of Life Insu	rers Political Action Committee	
Full Name (Last, First, Middle Initial) Mr. Maurice A. Perkins Mailing Address 101 Constitution Ave, NW Suite 700 City	State Zip Code	Date of Receipt M
Washington	DC 20001-2133	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	416.66
Name of Employer American Council of Life Insurers Receipt For: Primary General Other (specify) ▼	Occupation Vice President, Federal Relations Aggregate Year-to-Date ▼ 2083.30	P/R Deduction (\$208.33 Semi-Monthly)
Full Name (Last, First, Middle Initial) Mr. Wayne A. Mehlman Mailing Address 404 Constitution August 1	NIA/	Date of Receipt
Mailing Address 101 Constitution Avenue, I Suite 700 City Washington FEC ID number of contributing federal political committee. Name of Employer	State Zip Code DC 20001-2133 C	05 31 2015 Transaction ID : PR904819541077 Amount of Each Receipt this Period 50.00
American Council of Life Insurers Receipt For: Primary General Other (specify) ▼	Counsel, Insurance Regulation Aggregate Year-to-Date ▼ 250.00	P/R Deduction (\$25.00 Semi-Monthly)
Full Name (Last, First, Middle Initial) Mailing Address		Date of Receipt
City	State Zip Code	Amount of Each Pagaint this Pariod
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer	Occupation	-
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional)	466.66
TOTAL This Period (last page this line numl	per only)	60741.36

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 37 OF 47 (check only one)
TEMIZED RECEIPTS	for each category of the	
	Detailed Summary Page	13 14 15 16 17
Any information copied from such Reports and State or for commercial purposes, other than using the nar		
NAME OF COMMITTEE (In Full) American Council of Life Insurers I	Political Action Committee	
Full Name (Last, First, Middle Initial) 1. OneAmerica Financial Partners, Inc. PAC		Date of Receipt
Mailing Address One American Square P.O. Box 368		05 11 2015
,	State Zip Code	Transaction ID : 65838989
Indianapolis	IN 46206	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C00143164	5000.00
Name of Employer O	ccupation	
	ggregate Year-to-Date ▼	
Primary General Other (specify) ▼	5000.00	
Full Name (Last, First, Middle Initial) 3. Sammons Enterprises Inc. PAC		Date of Receipt
Mailing Address 5949 Sherry Lane Suite 1900		05 11 2015
•	State Zip Code	Transaction ID: 65838990
Dallas	TX 75225	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C00388777	5000.00
Name of Employer O	ccupation	
Receipt For:	ggregate Year-to-Date ▼	
Primary General Other (specify) ▼	5000.00	
Full Name (Last, First, Middle Initial) C. Massachusetts Mutual Life Ins. Co P.	AC	Date of Receipt
Mailing Address 1295 State Street		05 18 2015
City Springfield	State Zip Code MA 01111	Transaction ID : 65892456
EEC ID number of contributing		Amount of Each Receipt this Period
federal political committee.	C00118943	5000.00
, ,	ccupation	
	ggregate Year-to-Date ▼	
Primary General Other (specify) ▼	5000.00	
SUBTOTAL of Receipts This Page (optional)		15000.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) TEMIZED RECEIPTS	,	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 38 OF 47 (check only one) 11a 11b X 11c 12 13 14 15 16 11
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.
American Council of Life Inst	urers Politica	al Action Committee	
Full Name (Last, First, Middle Initial) A. Pacific Life Insurance Company P Mailing Address 700 Newport Center Drive			Date of Receipt
0::		7. 0. 1	05 18 2015
City	State	Zip Code	Transaction ID: 65892458
Newport Beach	CA	92660	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C co	0068528	5000.00
Name of Employer	Occupation		
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General	7.99.094.0		7
Other (specify) ▼		5000.00	
Full Name (Last, First, Middle Initial)			
Thrivent Financial for Lutherns F	PAC		Date of Receipt
Mailing Address P.O. Box 1892			05 26 2015
City	State	Zip Code	Transaction ID: 66237410
Appleton	WI	54912	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C cod	0121319	5000.00
Name of Employer	Occupation		
Receipt For:	Aggregate	Year-to-Date ▼	_
Primary General	riggregate	Total to Bate V	1
Other (specify) ▼		5000.00	
Full Name (Last, First, Middle Initial) Azoa Services Corp PAC (Allia		a PAC)	Date of Receipt
Mailing Address 1101 Connecticut Ave, N #950		7: 0.1	05 26 2015
City Washington	State DC	Zip Code 20036	Transaction ID: 66237411
	50	20000	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C co	0095109	5000.00
Name of Employer	Occupation		
Receipt For:	Aggregate	Year-to-Date ▼	_
Primary General	7 1991 09416	10 5410 7	
Other (specify) ▼		5000.00]
SUBTOTAL of Receipts This Page (optional))		15000.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS Any information copied from such Reports and			
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Council of Life Insure	e name and a	ddress of any political committee	
Full Name (Last, First, Middle Initial) A. AEGON USA LLC/Transamerica Cor Mailing Address 600 13th St NW Suite 400B City Washington FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State DC Coc	Zip Code 20005 0236414 Year-to-Date ▼	Date of Receipt M
Full Name (Last, First, Middle Initial) Pan-American Life Insurance Com Mailing Address 601 Poydras St 12th Floor City New Orleans FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State LA C coo	Zip Code 70130 0232272 Year-to-Date ▼	Date of Receipt 05 26 2015 Transaction ID: 66237653 Amount of Each Receipt this Period 3000.00
Full Name (Last, First, Middle Initial) AXA Equitable PAC Mailing Address c/o AXA Equitable Life Assured 1290 Avenue of the America City New York FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State NY C Coo	Zip Code 10104 0161901 Year-to-Date ▼	Date of Receipt 05 26 2015 Transaction ID: 66237654 Amount of Each Receipt this Period 5000.00
SUBTOTAL of Receipts This Page (optional)			13000.00

TOTAL This Period (last page this line number only).....

43000.00

SCHEDULE B (FEC Form 3X)	Use separate schedule(, FOR LINE	NUMBER:	PAGE 40 OF 47
ITEMIZED DISBURSEMENTS	, I (clieck only	•		
	for each category of the Detailed Summary Page		22 X 23 24 28a 28b 28	
Any information copied from such Reports and Stater or for commercial purposes, other than using the nam				
NAME OF COMMITTEE (In Full)				
American Council of Life Insurers F	Political Action Cor	nmittee		
/ American Council of Life insurers i		mmicoo		
Full Name (Last, First, Middle Initial)				
A. Defend America PAC			Date of Disbursement	
Mailing Address P.O. Box 2626			05 12	2015
Mailing Address P.O. Box 2020			05 12	2015
City	State Zip Code			
Tuscaloosa	AL 35403		Transaction ID: 6578	3004
Purpose of Disbursement Political Contribution		100		
		011	Amount of Each Disbur	sement this Period
Candidate Name Defend America PAC		Category/		5000.00
Office Sought: House Disburser	ment For:	Type		,
Senate Sought.	Primary General		Political Contribution	
President	Other (specify)		Political Contribution	
State: District:	· · · · · · · · · · · · · · · · · · ·			
Full Name (Last, First, Middle Initial)				
 B. Opportunity and Responsibility Restored 	d in our Nation PAC (Orrinpac)	Date of Disbursement	
			M = M / D = D /	Y Y Y Y
Mailing Address P.O. Box 3986			05 12	2015
City	State Zip Code			
Washington	DC 20027		Transaction ID: 6578	3059
Purpose of Disbursement				
Void Ck #8436 written on 05/12/15		011	Amount of Each Disbur	sement this Period
Candidate Name	Nation DAC (Ominos)	Category/		5000.00
Opportunity and Responsibility Restored in our		Туре		3000.00
Office Sought: House Disburser				
Senate President	Primary General Other (specify) ▼		Void Ck #8436 written or	n 05/12/15
State: District:	Other (specify)			
Full Name (Last, First, Middle Initial)				
C. Friends Of Kelly Ayotte Inc			Date of Disbursement	
			M M / D D /	YYYY
Mailing Address PO Box 937			05 13	2015
0.1	01-1- 7'- 0-1-			
City S Manchester	State Zip Code NH 03105		Transaction ID: 6578	3163
Purpose of Disbursement				
Political Contribution		011	Amount of Each Disbur	sement this Period
Candidate Name		Category/		1000.00
Sen. Kelly Ayotte		Type		1000.00
	ment For: 2016			
Senate Senate	Primary General		Political Contribution	
State: NH District:	Other (specify) ▼			
Ciato. 1411 District.				
SUBTOTAL of Disbursements This Page (optional)				11000.00
TOTAL This Period (last page this line number only)			1	

SCHEDULE B (FEC Form 3X)		FOR LINE I	NUMBER: PAGE 41 OF 47
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)
	Detailed Summary Page	21b	22 X 23 24 25 26
		27	28a 28b 28c 29 30b
Any information copied from such Reports and Staten or for commercial purposes, other than using the name	nents may not be sold or use he and address of any politica	d by any perso al committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
American Council of Life Insurers F	Political Action Comm	nittee	
Full Name (Last, First, Middle Initial)			
A. Kind For Congress Committee			Date of Disbursement
Mailing Address 205 5th Avenue South			05 13 2015
City	State Zip Code		Transaction ID - 65792464
LaCrosse	WI 54601		Transaction ID: 65783164
Purpose of Disbursement Political Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	4000.00
Rep. Ron Kind		Type	4000.00
Senate	nent For: 2016 Primary		Political Contribution
State: WI District: 03			
Full Name (Last, First, Middle Initial)			
B. Friends Of Dennis Ross			Date of Disbursement
Mailing Address 133 South Harbor Drive			05 13 2015
Venice	State Zip Code FL 34285		Transaction ID: 65783165
Purpose of Disbursement Political Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	2000.00
Rep. Dennis Ross		Type	2000.00
	nent For: 2016 Primary General Other (specify)		Political Contribution
Full Name (Last, First, Middle Initial)			
C. Pascrell For Congress			Date of Disbursement
Mailing Address P.O. Box 1000			05 13 2015
City S	State Zip Code NJ 07666		Transaction ID : 65783167
Purpose of Disbursement Political Contribution	7,000	011	
Candidate Name			Amount of Each Disbursement this Period
Rep. William Pascrell Jr.		Category/ Type	2000.00
Office Sought: House Disbursen	nent For: 2016 Primary General		
President	Primary General Other (specify) ▼		Political Contribution
State: NJ District: 09			
SUBTOTAL of Disbursements This Page (optional)		······	8000.00
TOTAL This Period (last page this line number only)			

2	CHEDULE B (FEC Form 3X)			_										
31	CHEDOLE B (FEC FOIIII 3X)									PAGE	42	OF	47	
IT	EMIZED DISBURSEMENTS	Use sepa	(check only											
			category of the Summary Page			21b	22	X	23		24	25		26
		Detailed	Summary Fage			27	28a		28b	\square	28c	29		30b
Δr	ny information copied from such Reports and State	ments may r	not he sold or use	ed by	anv	nerso	n for the	יוות ב	2000	of soli	citing	contrib	utions	
	for commercial purposes, other than using the nar													,
\			, , , , , , , , , , , , , , , , , , ,											
	NAME OF COMMITTEE (In Full)	D. Person	A	•										
	American Council of Life Insurers I	Political /	Action Comr	nitte	е									
_														
	Full Name (Last, First, Middle Initial)						5 .							
Α.	Tim Scott For Senate						Date	of Dis	sburse	ment				
							M	VI /	D	D /	Υ	Y Y	Y	
	Mailing Address 1405 Ashley River Road						05	_	1	3		2015		
	City	State	Zip Code				Tran	eacti	on ID	. 657	83168			
	Charleston	SC	29407					Juoti	0	. 001	00100			
	Purpose of Disbursement				-									
	Political Contribution			0	11_		Amou	nt of	Each	Disbu	ırseme	nt this	Perio	od
	Candidate Name			Cate	aorv	,/		_	-		-			
	Sen. Tim Scott				pe	"					7	300	00.00	
	Office Sought: House Disburse	ment For: 2	2016		•									
	▼ Senate ▼	Primary	General				Politica	al Car	atribut	ion				
	President	Other (spec					FUILLO	ai COi	itiibut	1011				
	State: SC District:	Outlot (opoc	, y / ▼											
_	Full Name (Last, First, Middle Initial)						Data	· (D:						
В.	Tim Scott For Senate						Date	ot Dis	sburse	ment				
							M - I	VI /	_	D /	Υ	Y - Y	Y	
	Mailing Address 1405 Ashley River Road						05	_	1	3	_	2015		
	City	State	Zip Code				Tran	sacti	on ID	: 657	83169			
	Charleston	SC	29407											
	Purpose of Disbursement				-	7								
	Political Contribution			0	11		Amou	nt of	Each	Disbu	ırseme	nt this	Perio	od
	Candidate Name			Cate	aorv	//						40	20.00	
	Sen. Tim Scott				γpe				7		7	100	00.00	
	Office Sought: House Disburse	ment For: 2	2016											
	▼ Senate	Primary	✓ General				Politic	al Co	ntribut	ion				
	President	Other (spec	cify) 🔻				1 Ontio	u. 00.		.011				
	State: SC District:	` '	3, 4											
_	Full Name (Last, First, Middle Initial)													
							Date	of Die	huroo	mont				
U.	Friends Of Pat Toomey						Date	טו טונ	burse	meni				
							M	VI /		D /		YY	Y	
	Mailing Address 228 S Washington Street						05		1	3		2015		
	Suite 115	<u> </u>	- : • ·											
	•	State	Zip Code				Tran	sacti	on ID	: 657	83171			
	Alexandria	VA	22314											
	Purpose of Disbursement Political Contribution													
				0	11		Amou	nt of	Each	Disbu	ırseme	nt this	Perio	od
	Candidate Name			Cate	gory	//			-			200	00.00	
	Sen. Pat Toomey			Ту	/pe				7		7	200	.0.00	
	Office Sought: House Disburse	ment For: 2	:016			\neg								
	Senate	Primary	General				Politica	al Cor	ntribut	ion				
	Procident	Other Janes	cify) •											
	President	Other (spec	, , ▼											
	State: PA District:	Other (spec	,, ▼											
		Other (spec	,				_	_	_	_	_	_	_	_
-	State: PA District:						_	-	-	-	-	600	00.00	$\overline{}$
s						<u> </u>		-		-	7	600	00.00	

2	CHEDULE B (FEC Form 3X)				_					
J'	CHEDOLL D (I LC I OHH 3X)	Use separate schedule(s)		NE NUMBER: PAGE 43 OF 4						
IT	EMIZED DISBURSEMENTS	for each category of the	(check	only one)						
		Detailed Summary Page		21b 22 X 23 24 25 26						
				27 28a 28b 28c 29 30k	b					
Α	ny information copied from such Reports and Statem	nents may not be sold or us	sed by any r	person for the purpose of soliciting contributions						
10	r for commercial purposes, other than using the nam	e and address of any politic	cal committe	ee to solicit contributions from such committee.						
$\overline{\ }$	NAME OF COMMITTEE (In Full)				_					
/		Com	: -							
	American Council of Life Insurers P	olitical Action Com	mittee							
_	Full Name (Last, First, Middle Initial)				_					
^				Date of Dichamanant						
Η.	Friends Of Chris Murphy			Date of Disbursement						
				M M / D D / Y Y Y Y Y						
	Mailing Address PO Box 127			05 13 2015						
					_					
	,	State Zip Code		Transaction ID : 65783180						
	Cheshire	CT 06410								
	Purpose of Disbursement		100	7						
	Political Contribution		011	Amount of Each Disbursement this Period						
	Candidate Name		Category	0500.00						
	Mr. Christopher Murphy		Type	2500.00						
		nent For: 2018								
	▼ Senate	Primary General		Political Contribution						
		Other (specify) ▼		1 Ollical Collinguion						
	State: CT District:	2018 Convention	Flec							
		2010 0011101111011			_					
_	Full Name (Last, First, Middle Initial)	•		Date of Dishamous and						
В.	Richard E. Neal for Congress Com	mittee		Date of Disbursement						
				M = M / D = D / Y = Y = Y						
	Mailing Address 76 Magnolia Terrace			05 13 2015						
	City	State Zip Code		Transaction ID : 65783186						
	-p9	MA 01108		Transaction is . corco too						
	Purpose of Disbursement			7						
	Political Contribution		011	Amount of Each Disbursement this Period						
	Candidate Name		Category							
	Rep. Richard Neal		Type	5000.00						
		nent For: 2016								
	Senate	Primary General		Political Contribution						
		Other (specify) ▼		Folitical Contribution						
	State: MA District: 01	Carlot (opcony)								
					_					
_	Full Name (Last, First, Middle Initial)			B + (B) +						
C.	Lynn Jenkins For Congress			Date of Disbursement						
				M M / D D / Y Y Y Y						
	Mailing Address PO Box 1441			05 13 2015						
	•	State Zip Code		Transaction ID: 65783200						
	· - F - · · · ·	KS 66601								
	Purpose of Disbursement			7						
	Political Contribution		011	Amount of Each Disbursement this Period						
	Candidate Name		Category							
	Rep. Lynn Jenkins		Type	2500.00						
		nent For: 2016			1					
		Primary General		Political Contribution						
		Other (specify)		i olitical contribution						
	State: KS District: 02	- · · · (- - > • · · J / ■								
	Similar NO Diotriot. UZ				_					
				10000.00						
5	SUBTOTAL of Disbursements This Page (optional)			1000.00						
	FOTAL This Period (last page this line number only)									

SCHEDULE B (FEC Form 3X)		FOR LINE N	NUMBER: PAGE 44 OF 47	_
ITEMIZED DISBURSEMENTS	Use separate schedule(s)	(check only		
	for each category of the Detailed Summary Page	21b	22 🗙 23 🗌 24 📗 25 🔲 26	
	, ,	27	28a 28b 28c 29 30	b
Any information copied from such Reports and Statem or for commercial purposes, other than using the name	nents may not be sold or use ne and address of any politica	d by any perso al committee to	n for the purpose of soliciting contributions solicit contributions from such committee.	
NAME OF COMMITTEE (In Full)				
American Council of Life Insurers F	Political Action Comm	nittee		
Full Name (Last, First, Middle Initial)				Τ
A. Himes For Congress			Date of Disbursement	
Mailing Address 857 Post Road #312			05 13 2015	
•	State Zip Code		Transaction ID: 65783798	
Fairfield Purpose of Disbursement	CT 06824		Transaction is 1 coroors	
Political Contribution		011	Amount of Each Disbursement this Period	
Candidate Name		Category/	1000.00	
Rep. Jim Himes Office Sought: House Disbursen	nent For: 2016	Туре	7	
Senate	Primary General Other (specify) ▼		Political Contribution	
State: CT District: 04	2016 Convention E	lec		
Full Name (Last, First, Middle Initial)				
B. Ryan for Congress, Inc.			Date of Disbursement	
Mailing Address P.O. Box 1488			05 13 2015	
Janesville	State Zip Code WI 53547		Transaction ID: 65783801	
Purpose of Disbursement Political Contribution		011	Amount of Each Disbursement this Period	
Candidate Name		Category/	3500.00	
Rep. Paul Ryan		Туре	3300.00	
Senate	nent For: 2016 Primary General Other (specify)		Political Contribution	
Full Name (Last, First, Middle Initial)				_
C. Ryan for Congress, Inc.			Date of Disbursement	
Mailing Address P.O. Box 1488			05 13 2015	
City S Janesville	State Zip Code WI 53547		Transaction ID: 65783803	_
Purpose of Disbursement Political Contribution		011	Assessed of Early Disharmon and this Basical	
Candidate Name			Amount of Each Disbursement this Period	
Rep. Paul Ryan		Category/ Type	1500.00	
Senate	nent For: 2016 Primary General Other (specify)		Political Contribution	
State: WI District: 01				_
SUBTOTAL of Disbursements This Page (optional)		······	6000.00	
TOTAL This Period (last page this line number only)		·····•		

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 45 OI	- 47
ITEMIZED DISBURSEMENTS	Use separate schedule(for each category of the	(orlook orliy	•	
	Detailed Summary Page		22 X 23 24 25 28 28a 28b 29	26 30b
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NAME OF COMMITTEE (In Full)	запачания за вану ра			
American Council of Life Insurers	Political Action Co.	mmittee		
/ American Council of Life modifiers	i dillodi Addoli Odi	Tillitico		
Full Name (Last, First, Middle Initial)				
A. Hoyer for Congress			Date of Disbursement	
Mailing Address 700 13th St NW			05 13 2015	7
Suite 600			03 13 2013	-
City	State Zip Code		Topo and an ID 05700070	
Washington	DC 20005		Transaction ID: 65783872	
Purpose of Disbursement Political Contribution		244		
Candidate Name		011	Amount of Each Disbursement this Pe	riod
		Category/	5000.0	00
Rep. Steny Hoyer Office Sought: House Disburse	ement For: 2016	Type	7	_
Senate Seaghti	Primary General		Political Contribution	
President	Other (specify)		1 Gillical Contribution	
State: MD District: 05				
Full Name (Last, First, Middle Initial)				
B. Friends Of Sherrod Brown			Date of Disbursement	
			M - M / D - D / Y - Y - Y - Y	7
Mailing Address PO Box 15293			05 13 2015	_
City	State Zip Code			
Washington	DC 20003		Transaction ID: 65783874	
Purpose of Disbursement				
Political Contribution		011	Amount of Each Disbursement this Pe	riod
Candidate Name		Category/	1000.	00
Sen. Sherrod Brown Office Sought: House Disburse	ement For: 2018	Туре		
	Primary General		Political Contribution	
President	Other (specify) ▼		Folitical Contribution	
State: OH District:				
Full Name (Last, First, Middle Initial)				
C. Tammy Baldwin For Senate			Date of Disbursement	
			M M / D D / Y Y Y	7
Mailing Address P.O. Box 696			05 13 2015	_
City	State Zip Code			
Madison	WI 53701		Transaction ID: 65783926	
Purpose of Disbursement				
Political Contribution		011	Amount of Each Disbursement this Pe	eriod
Candidate Name		Category/	1000.0)()
Sen. Tammy Baldwin	ament For: 2040	Category/ Type	1000.0	00
Sen. Tammy Baldwin Office Sought: House Disburse	ement For: 2018	Type		00
Sen. Tammy Baldwin	ement For: 2018 Primary General Other (specify)	Type	1000.0	00
Sen. Tammy Baldwin Office Sought: House Disburse X Senate	Primary General	Type		00
Sen. Tammy Baldwin Office Sought: House Senate President Senate President	Primary General	Type	Political Contribution	
Sen. Tammy Baldwin Office Sought: House Senate President Senate President	Primary General Other (specify) ▼	Type		
Sen. Tammy Baldwin Office Sought: House Senate President State: WI District:	Primary General Other (specify) ▼	Type	Political Contribution	

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 46 OF 47
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only	TOWELL:
		21b	22 🔀 23 🔲 24 📗 25 🖂 26
		27	28a 28b 28c 29 30b
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or for commercial purposes, other than using the nar	ne and address of any politica	ai committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full)	Political Action Comm	·:.	
American Council of Life Insurers I	Political Action Comm	nittee	
Full Name (Last, First, Middle Initial)			
A. Devin Nunes Campaign Committee	Э		Date of Disbursement
M.W. All. 202 202			M M / D D / Y Y Y Y Y Y Y Y Y Y
Mailing Address PO Box 6545			05 13 2015
City	State Zip Code		
Visalia	CA 93290		Transaction ID: 65783927
Purpose of Disbursement Political Contribution			
Candidate Name		011	Amount of Each Disbursement this Period
Rep. Devin Nunes		Category/ Type	2500.00
•	nent For: 2016	туре	
Senate	Primary General		Political Contribution
President	Other (specify) ▼		
State: CA District: 22			
Full Name (Last, First, Middle Initial)			5
B. Friends Of Sherrod Brown			Date of Disbursement
Mailing Address PO Box 15293			05 13 2015
ag / tea. eee			70 10 20,0
,	State Zip Code		Transaction ID : 65783931
Washington Purpose of Disbursement	DC 20003		
Political Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	
Sen. Sherrod Brown		Type	1000.00
Office Sought: House Disbursel	nent For: 2018		
Senate	Primary General		Political Contribution
President State: OH District:	Other (specify) ▼		
Full Name (Last, First, Middle Initial)			
C. Friends of Jeb Hensarling			Date of Disbursement
			M M / D D / Y Y Y Y
Mailing Address PO Box 820504			05 13 2015
City	State Zip Code		
Dallas	TX 75382		Transaction ID: 65783933
Purpose of Disbursement			
Political Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	5000.00
Rep. Jeb Hensarling Office Sought:	ment For: 2016	Туре	5555.00
Senate Dispurse	Primary General		Political Contribution
President	Other (specify)		Political Contribution
State: TX District: 05	,		
SUBTOTAL of Disbursements This Page (optional)		••••••	8500.00
TOTAL This Period (last page this line number only			

SCHEDULE B (FEC Form 3X)		EOD LINE	NUMBER: PAGE 47 OF 47		
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	\ I -	FOR LINE NUMBER: PAGE 47 OF 47 (check only one)		
		` 21b	22 🗙 23 24 25 26		
	Detailed Sulfilliary Fage	27	28a 28b 28c 29 30l		
Any information copied from such Reports and State					
or for commercial purposes, other than using the na	me and address of any politi	cal committee to	solicit contributions from such committee.		
NAME OF COMMITTEE (In Full)					
American Council of Life Insurers	Political Action Com	ımittee			
Full Name (Last, First, Middle Initial)		1			
A. Friends Of Jim Clyburn			Date of Disbursement		
Therias Of Jim Clybam			M M / D D / Y Y Y Y		
Mailing Address PO Box 12567			05 13 2015		
City	State Zip Code		Transaction ID: 65783934		
Columbia Purpose of Disbursement	SC 29211				
Political Contribution		011	Amount of Each Disbursement this Period		
Candidate Name			Amount of Each Blobardement this Ferroa		
Rep. James Clyburn		Category/ Type	1000.00		
	ment For: 2016	,,			
Senate X	Primary General		Political Contribution		
President	Other (specify) ▼				
State: SC District: 06					
Full Name (Last, First, Middle Initial)			Data of Disharasant		
B. Citizens For Waters			Date of Disbursement		
Mailing Address 3700 Wilshire Blvd			05 13 2015		
Suite 1050-B			15 15 15010		
City	State Zip Code		Transaction ID : 65783935		
Los Angeles	CA 90010				
Purpose of Disbursement Political Contribution		011	Amount of Each Disbursement this Period		
Candidate Name			Amount of Each Disburseffield this Fellou		
Rep. Maxine Waters		Category/ Type	4000.00		
	ment For: 2016	- 7/0-0	,		
Senate	Primary General		Political Contribution		
President	Other (specify) ▼				
State: CA District: 43					
Full Name (Last, First, Middle Initial)			B (B) .		
C.			Date of Disbursement		
Mailing Address			M M / D D / Y Y Y Y		
Mailing Address					
City	State Zip Code				
Purpose of Disbursement					
Candidate Name			Amount of Each Disbursement this Period		
Candidate Name		Category/ Type			
Office Sought: House Disburse	ment For:	Type			
Senate	Primary General				
President	Other (specify) ▼				
State: District:					
·					
SUBTOTAL of Disbursements This Page (optional).		·····	5000.00		
			64500.00		
TOTAL This Period (last page this line number only)		61500.00		